

05/26/2017

CMZ-4ZM0 <30-420BAF A2A-203

Updates from the MT  
Laboratory Services

Bureau

800-821-7284

[www.lab.hhs.mt.gov](http://www.lab.hhs.mt.gov)



## Blood Lead Testing Update

On May 17, 2017, you should have received our initial notification about FDA's warning regarding venous blood lead testing. The FDA issued a safety warning indicating that Magellan Diagnostics' LeadCare Testing Systems may underestimate blood lead levels and give inaccurate results when processing venous blood samples. At this time, the FDA has no evidence that Magellan's LeadCare Testing Systems have the same problem when processing capillary blood samples.

**The complete text of the FDA safety communication warning, May 17, 2017 is available at:**

<https://www.fda.gov/MedicalDevices/Safety/AlertsandNotices/ucm558733.htm>

As a result, the Montana Public Health Laboratory has temporarily discontinued performing blood lead testing on venous specimens in-house, and in turn will send out all venous blood specimens to South Dakota Public Health Laboratory for testing by graphite furnace atomic absorption. MTPHL is still able to perform blood lead testing on capillary specimens. As before, any capillary specimens resulting in high lead values will be telephoned to the submitter and require recollection of a venous specimen.

Please continue to send blood lead specimens as you have in the past. The turnaround time should be 3-5 working days. In addition, the Montana Public Health Laboratory is currently working on validating blood lead testing by mass spectrometry in-house and hopes to have it up and running in the near future.

Please feel free to contact the Public Health Laboratory at 1-800-821-7284 with any questions or concerns.

## Sentinel Laboratory Drill

On May 24th, the MTPHL Biopreparedness section conducted a sentinel laboratory, response time drill. The performance measure was the time for at least one staff member at each of the 18 sentinel clinical laboratories to acknowledge receipt of an urgent email and/or fax message from the CDC Public Health funded Laboratory Response Network biological (LRN-B) laboratory, the MTPHL.

The message was emailed to 18 people using the contact information for the laboratory managers and microbiology supervisors that are on file in the MTPHL sentinel laboratory outreach database. The message was also faxed to each laboratory using the fax numbers that are on file in the MTPHL sentinel laboratory outreach database.

There was an impressive response rate amongst the 18 certified sentinel laboratories. At 2.5 hours post drill, 88% (16 labs) had responded by email, phone or fax. The overall response rate was 94% (17 labs).

Thank you to all the Montana Sentinel Labs for participating in the drill and responding in a timely manner. In the event of an actual public health emergency, MTPHL would use these methods of communication to relay important information to all of the sentinel laboratories. Please contact Lana Moyer, [lmoyer@mt.gov](mailto:lmoyer@mt.gov), 406-444-0944 or Crystal Fortune, [cfortune@mt.gov](mailto:cfortune@mt.gov), 406-444-0930 if you have any questions or would like information on how to become a Certified, Sentinel Laboratory.



Release date: 5/26/2017

**Infographic of the Week:** The week before Memorial Day weekend marks the annual Healthy Swimming week. The beginning of swim season is a great reminder to all recreational water user to be safe around water. Illness and injury can be prevented by following simple steps. More on healthy swimming as well as additional CDC resources can be found at <http://dphhs.mt.gov/publichealth/cdepi/rwii>. CDEpi is planning to post a press release closer to July, when Montanans are most likely to go swimming.



To download and print a high resolution pdf version of MTDPHHS infographics, or to view the archive of weekly infographics, please visit the [CDEpi infographics page](#).

## DISEASE INFORMATION

**Summary – MMWR Week 20: Ending 5/26/17** Preliminary disease reports received by DPHHS for the reporting period May 14–20, 2017 included the following:

- **General Communicable Diseases:** (0)
- **Enteric Diseases:** Campylobacteriosis (8), Cryptosporidiosis (2), Giardiasis (2), Salmonellosis (3), Shiga toxin producing *E. coli* [STEC] (5)
- **Vaccine Preventable Diseases:** Influenza hospitalization<sup>†</sup> (11), Pertussis (18), *Streptococcus pneumoniae* (2)
- **STD/HIV:** Chlamydia (87), Gonorrhea (11), Syphilis (0), HIV<sup>\*</sup> (0)
- **Hepatitis:** Hepatitis B, chronic (2), Hepatitis C, chronic (56)
- **Zoonotic diseases:** Leishmaniasis<sup>‡</sup> (1), Malaria<sup>‡</sup> (1)
- **Animal Rabies:** (1, bat)

*\* A case is included if a new confirmatory test or report was received by DPHHS. Cases include both persons who were newly diagnosed and persons newly reported in Montana who may have been diagnosed in another state or country.*

*† Influenza hospitalizations are presented by the MMWR week that the case was reported into MIDIS. For additional information on influenza, please refer to the weekly Montana Influenza Summary.*

*‡ Case is acquired outside of Montana*

*NOTE: The attached report has multiple pages reflecting the following information: (1) cases for the past reporting week; (2) communicable diseases YTD; and (3) clusters and outbreaks.*

## HOT TOPICS

**Influenza B outbreak (update):** Corrections staff implemented several control measures over the last week which appear to have helped to slow down the progression of an influenza B outbreak at the state prison. The number of ill individuals has begun to decline and no severe (hospitalized) cases have been reported during the week. Control measures and surveillance will continue for at least another week.

**Pertussis (update):** Several additional cases of pertussis have been reported from Lewis and Clark County this week and for the most part have been contacts to previous cases. The total number of cases reported is now 17 and cases range from 9 months to 18 years. The majority of cases were vaccinated appropriately for age.

**Syphilis UPDATE:** We are continuing to work with local health departments to respond to syphilis cases and contacts. As of May 25, Montana has recorded 20 cases of primary or secondary syphilis (P&S). This compares to 14 P&S cases in all of 2016. Half of 2017 cases have been reported out of Yellowstone County. Other counties with cases are: Missoula with three, Lewis and Clark, Stillwater and Flathead each have two cases, and both Cascade and Park have one reported case of primary or secondary syphilis. Affected jurisdictions need to monitor supplies of Bicillin LA, and increase as needed their traditional amount of medication inventory.

Local health agencies are doing a great job working to ensure treatment is appropriate and contact interviews are conducted. Providers are reminded to take sexual histories and conduct routine STD screening to help identify cases among those at risk. Education, testing and treatment cases and contacts are all key to interrupting the disease cycle. With the hope of finding more persons who have been exposed, the Communicable Disease Bureau is sponsoring a rapid syphilis test pilot project that will be conducted by several HIV prevention counseling and testing sites throughout the summer. Please see information under Information/Announcements for a training opportunity coming to Montana.

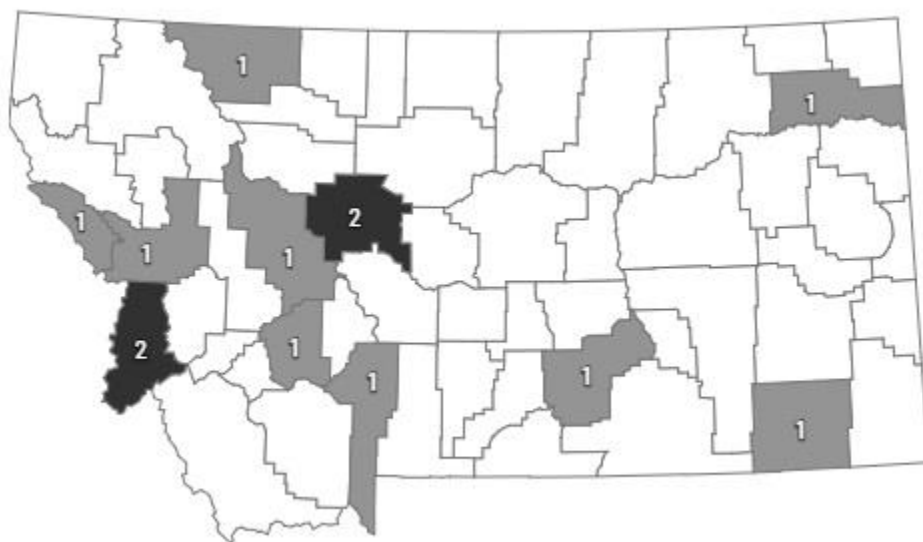
For more information about syphilis, visit our website:

<http://dphhs.mt.gov/publichealth/hivstd/stdprevention.aspx>

**Salmonella and live poultry:** There are now 11 different *Salmonella* serotypes with unique fingerprinting patterns (PFGE) linked to live poultry in the United States. In Montana, 13 cases with four of the serotypes have been linked these outbreaks.

The Montana Public Health Laboratory isolated *Salmonella* Typhimurium with matching fingerprinting pattern from one bird of a backyard flock. CDC is planning to post a web announcement sometime later next week. Once released, the media might inquire about your cases. CDEpi is going to prepare a press release during that time as well.

Figure: Montana salmonellosis outbreaks cases linked to live poultry 2017 as of 5/26/2017



**Salmonella Braenderup:** A total of eight cases have now been reported over a 10 months period with a matching PFGE pattern that is extremely rare. The earliest illness onset was in August 2016, an increase in cases occurred in March 2017 and recently a new case has been reported. Ill persons are mostly reported from Missoula (4), Ravalli (2) as well as Lewis & Clark (1) and Yellowstone (1) Counties. All but one have a direct link

to Missoula County, but a source has not been identified yet. The continuation of new illnesses is concerning and local and state partners are working diligently to solve this outbreak. Additional information will be posted when it becomes available.

### **INFORMATION/ANNOUNCEMENTS**

**CME from CDC and Medscape:** CME's for physicians, nurses and pharmacists are now available. The first in a series of infection control and prevention called "Risk Recognition in Healthcare Settings" is ([Available Now](#))

### **COURSE- MOTIVATIONAL INTERVIEWING FOR HEALTH BEHAVIOR CHANGE**

Presented by Dr. Paul Cook, PhD and licensed psychologist, University of Colorado

Course Overview: This course will provide an in-depth understanding of Motivational Interviewing (MI) as an evidence based approach to support health behavior change. A health care provider's knowledge of how to recognize patients' readiness, barriers, and motivation for change is essential to improving health outcomes.

Dr. Paul Cook has a primary research focus on implementing psychologically based behavior-change techniques in health-care settings to help patients' self-manage chronic conditions. He is currently the primary investigator or co-investigator on studies of psychological methods for training health-care providers to implement behavior-change techniques.

#### **Dates**

June 20, 2017

Time: 8:30 am – 4:30 pm

Location: Hilton Garden Inn – Missoula, Montana

3720 N. Reserve St

(406) 532-5300

June 22, 2017

Time: 8:30 am – 4:30 pm

Location: Radisson Hotel – Billings, Montana

15500 Midland Rd

(406) 248-7701

Click here for more information or to [register](#).



## **Q&A CORNER**

***Q: Someone found a bat on the ground and is asking if they should send it in for rabies testing. What is our advice?***

**A:** It is that time of year when people begin hiking, camping and otherwise recreating outdoors more frequently. Naturally, they will encounter wild animals, including bats. Generally speaking, CDEpi does NOT recommend testing of any animal UNLESS there was a human or pet exposure.

For example, if anyone finds a bat, but no person or pet had direct contact with it, rabies testing would not be recommended. **However**, if there was any physical contact to mouth parts, or other physical contact that cannot rule out an exposure such as a bat brushing up against a person OR the bat was found inside an area where people sleep (i.e. tent/ room), or found in a room where a child, intoxicated or mentally ill persons was left unsupervised, we DO recommend testing the bat for rabies. Please visit our rabies webpage for additional information: <http://dphhs.mt.gov/publichealth/cdepi/diseases/rabies>

***Q: Why are there two MIDIS manuals? When will there be a comprehensive manual that covers both STDs and non-STD diseases?***

**A.** The MIDIS manual encompassing STDs and all other communicable diseases is currently in progress. Shortly after MIDIS is upgraded to version 5.1.0.1, the complete MIDIS manual will be released, and will include the changes to the new version of MIDIS. The 5.1.0.1 upgrade is expected to be completed in the next few weeks.

### **Communicable Disease Epidemiology Suggestion Box:**

*To submit a question or comment to the Communicable Disease Epidemiology Section, please click on the suggestion box to access our online form.*

## **24/7 AVAILABILITY**

*The Communicable Disease Epidemiology (CDEpi) Section is available 24 hours a day, 7 days a week, 365 days a year, to assist local health jurisdictions. Local providers should call, including after normal business hours, their local health jurisdiction. The CDEpi 24-hour line is available as a back-up to the local health jurisdiction's 24-hour line. If you need CDEpi assistance, please call 406.444.0273. Phone calls to this number outside of normal business hours will be answered by the answering service. The answering service will immediately forward the message to CDEpi, and we will respond as quickly as possible.*

*Local health jurisdictions, please ensure that your local providers have your 24/7/365 contact information. And please inform CDEpi or the Public Health Emergency Preparedness Program of updates to your required 24/7 contact information.*

***This update is produced by the Montana Communicable Disease Epidemiology Section. Questions regarding its content should be directed to 406.444.0273 (24/7/365). For more information:***

<http://dphhs.mt.gov/publichealth/cdepi>